PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Number

300.1134

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TC	TAL CLAIMS		(COIGHIII 1)		Coid	11111 2]				ОН 1 П		
TOTAL OLAIMO			4				-	RATE	FEE	4	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			4 min	nus 20=	* -	*		X\$ 9=		OR	X\$18=	
IND	EPENDENT CI	LAIMS	/ mi	nus 3 =				· X43=		OR	X86=	
MU	ILTIPLE DEPEN	NDENT CLAIM PI	RESEŃT					+145=		OR	+290=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				١	TOTAL		OR	TOTAL	770
CLAIMS AS AMENDED - PART II								OTHER THAN				
		(Column 1)		(Column 2)		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	,	OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	ENTATION OF MU	JLTIPLE DEF	'ENDENT	CLAIM			+145=		OR	+290=	
•								TOTAL		OB.	TOTAL	
	•	1	ADDIT. FEE		JO. 1	ADDIT. FEE						
		(Column 1) CLAIMS		(Colun		(Column 3)	1 г	ī	ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEÉ
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X43=		OR	X86=	
4	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		J ├				.000	
								+145=		OR	+290=	
							A	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									ì		
* If the entry in column 1 is less than the ntry in column 2, write "0" in column 3.										+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ADDIT. FEE	
		nber Previously Paid					r four	nd in the app	ropriate box	in col	umn 1.	